

# L24000482456

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : MANRIQUE GROUP INC  
Account Number : I20230000155  
Phone : (305)794-3714  
Fax Number : (754)755-3388

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TALLAHASSEE, FL

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: Manriquegroupinc@gmail.com

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FLORIDA LIMITED LIABILITY CO.  
ROMANEA SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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**Articles of Organization  
For  
Florida Limited Liability Company**

**Article I**

The name of the Limited Liability Company is:  
ROMANEA SERVICES LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
515 NE 17TH AVE  
FORT LAUDERDALE FL. 33301

The mailing address of the Limited Liability Company is:  
515 NE 17TH AVE  
FORT LAUDERDALE. FL. 33301

**Article III**

The name and Florida street address of the registered agent is:  
ROMAN E. ALMIRON - AMBR  
515 NE 17TH AVE  
FORT LAUDERDALE, FL. 33301

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: *Roman E. Almiron*

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FORT LAUDERDALE, FL  
STATE OF FLORIDA

### Article IV

The name and address of person(s) authorized to manage LLC:

Title: AMBR  
ROMAN E. ALMIRON - AMBR  
515 NE 17TH AVE  
FORT LAUDERDALE , FL 33301

### Article V

The effective date for this Limited Liability Company shall be:

06/14/2024

Signature of member or an authorized representative

Electronic Signature: *Roman E. Almiron*

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

STATE OF FLORIDA  
NOV 15 PM 1:27